

Application for

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Vacancy Announcement Number: EPA-Exec-2017-0004  
Senior Executive Service Candidate Development Program  
U.S. Environmental Protection Agency  
November 15, 2016

Application of:

## **Qualification Highlights**

- Hired in newly created positions to launch and manage complex programs
- Diverse management experience in leading people, influencing change, developing collaborations, and managing resources
- 25 years of military reserve officer experience with progressive responsibility
- Served as principle investigator of multiple clinical vaccine safety studies
- Author and co-author of published articles in peer-reviewed journals

## **MANAGEMENT POSITIONS**

**First Responder Vaccine Initiative Manager, GS-14**                      **June 2014 - Present**  
**Office of Health Affairs, Department of Homeland Security (DHS), Washington, DC**

- Principal lead for establishing a comprehensive Anthrax Vaccine Pilot that supports national strategic goals for protection and preparedness of federal, state, and local first responders against an anthrax event through immunization.
- Optimize existing resources and form partnerships with internal and external stakeholders such as U.S. Customs Border and Protection and the Centers for Disease Control and Prevention to complete Pilot objectives while enhancing strategic thinking, reducing redundancy, and averting unnecessary costs.
- Lead strategic change by putting proven methodologies into practice such as Lean Six Sigma and Capability Analysis to maximize technological and personnel infrastructure.
- Establish strategic communications, outreach materials, education modules, logistical databases, and statistical analysis plans for implementing a quality vaccination initiative.
- Subject matter expert and/or voting member of national-level preparedness working groups including the Anthrax Integration Product Team for determining medical countermeasures for an anthrax event and the Federal Interagency Committee on Emergency Management Services, which recently provided input on guidance for transporting patients with Ebola Virus Disease.
- Provide technical expertise on preparedness, staffing, and public-private partnerships to DHS leadership, national advisory and technical committees; brief Congressional and White House staff on strategic goals and objectives for protecting first responders against biological threats through immunization.

**Chief of Public Health, Part-time/Lieutenant Colonel (Lt Col)** **March 2014 - Present**  
**107<sup>th</sup> Airlift Wing, New York Air National Guard, Niagara Falls, NY**

- Requested by name to lead personnel and oversee a comprehensive occupational and environmental health program to ensure a safe and healthy workplace for over 500 full- and part-time civilian and military personnel located at three different sites.
- Supervise and develop six employees to assess, control, monitor, and evaluate workplace health hazards and conduct medical surveillance and trends analyses.
- Manage the completion of annual training, medical readiness, and personal and respiratory protection requirements for seven Chemical, Biological, Radiological, and

Nuclear (CBRN)-Enterprise New York State response teams, which augment state and local first responders when activated by the Governor.

- Provide strategic level input and subject matter expertise as a member of the senior medical executive committee for setting priorities and monitoring organizational spending, overseeing costs and developing short- and long-term spend plans.
- Lead and mentor four junior officers and six enlisted personnel to accomplish operational and tactical objectives that support national, state, and unit strategic goals.

**Division Chief, Vaccine Safety and Evaluation, GS-14    February 2010 - June 2014**  
**Military Vaccine Agency, U.S. Army, Falls Church, VA**

- Hired to stand up a new division for conducting post-licensure vaccine safety and effectiveness studies required by the U.S. Food and Drug Administration (FDA).
- Supervisory epidemiologist and principal investigator of five Phase IV clinical vaccine safety and effectiveness studies, such as smallpox, Japanese encephalitis virus, H1N1 and seasonal influenza viruses, and adenovirus vaccines.
- Supervised two civil service employees and directed the activities of seven on-site contract clinical research associates and program managers of vaccine safety studies in coordination with three major pharmaceutical/vaccine companies and federal agencies.
- Managed a \$6 million extramural vaccine and immunization evaluation research program to support Department of Defense research goals and initiatives for protecting military personnel and enhancing medical readiness.
- Facilitated collaboration and selection of study sites for the third generation smallpox vaccine non-inferiority clinical trial required for FDA licensure; coordinated meetings with Army investigators, site support staff, Department of Health and Human Services personnel, contract research organizations, and the vaccine manufacturer to successfully establish a research study location and support team.
- Member of the Federal Immunization Safety Task Force (2009–2014), Federal H1N1 Vaccine Working Group (2009–2011), and Adenovirus Integrated Product Team (2009–2014) to monitor vaccine safety and effectiveness of newly licensed vaccines.

**Senior Preventive Medicine Mentor/Team Chief, (Lt Col)    June 2011 – April 2012**  
**U.S. Air Force, Operation Enduring Freedom, Afghanistan**

- Senior Preventive Medicine/Public Health Advisor for Afghan National Security Forces (ANSF), Afghan National Police (ANP), and Afghan National Army (ANA) command and medical personnel. Mentored nine ANSF leaders and advised the ANA Regional Surgeon General on public and environmental health issues.
- Assisted with the development and transition of operational, budgetary, logistic and information requirements to train, equip, and sustain ANSF medical units and recruit training centers.
- Fostered collaboration and led strategic change by partnering with Afghan counterparts and identifying viable solutions for sustained public health and vaccine management programs.
- Achieved buy-in from Afghan medical counterparts by developing the first-ever vaccine train-the-trainer program in the Dari language for ANP recruit training centers.

- Accountable for and managed \$2 million of Army training equipment and supplies.
- Managed and oversaw contracts worth \$18 million for resourcing three ANP recruit training sites and oversaw the smooth transition from coalition forces to the Government of the Islamic Republic of Afghanistan.
- Regional Support Commander's go-to officer for health and safety issues; addressed multiple issues to protect the health and well-being of U.S. and coalition forces.

**Public Health Officer, Part-time/Lt Col** **July 2002 – March 2014**  
**Headquarters, Air Force Reserve Command (AFRC), Robins Air Force Base, GA**

- Inspector General/Occupational Health Team Chief for the Environmental, Safety and Occupational Health Compliance and Assessment Program; managed and directed the activities of three team members and briefed unit commanders on program status.
- Coordinated and performed annual assessments, approved management action plans and mentored officer and enlisted personnel for occupational and environmental compliance at nine AFRC bases.
- Managed comprehensive AFRC-wide inspection checklists and procedures to improve occupational health and safety and reduce injuries and illnesses.
- Published research findings on the evaluation of hearing loss and exposures to noise and organic solvents among Air Force Reserve personnel in *Noise and Health*, an international, peer-reviewed journal.

**Program Manager** **July 2006 – February 2010**  
**Dynamic Research Corp./Contract Support for Military Vaccine Agency, U.S. Army, Falls Church, VA**

- Hired in newly created position to launch the Accession Screening and Immunization Program at five geographically separated Army enlisted basic training sites; program realized a cost-savings of over \$5 million annually from averted vaccinations based on screening for pre-existing serologic immunity among incoming recruits.
- Led the expansion of the program within two years to six additional basic training sites across the Department of Defense and U.S. Coast Guard.
- Facilitated collaboration across the military services and U.S. Coast Guard to ensure joint policy reflected program goals and objectives for vaccinating new accessions.
- Provided subject matter expertise during the rollout of the novel H1N1 influenza vaccine and participated on the vaccine safety national task force to monitor the occurrence of post-vaccination adverse events; provided real-time data analysis on the safety of the vaccine to inform decisions on U.S. population health risks.
- Preceptor of three Master of Public Health candidates; mentored one candidate to publish results in *Military Medicine*, a peer-reviewed journal.

## **EXECUTIVE CORE QUALIFICATIONS**

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### **LEADING CHANGE**

As Program Manager of the Accession Screening and Immunization Program, I led the implementation of a new policy initiative across five Army basic training sites to eliminate unnecessary immunizations for five vaccine-preventable diseases (measles, rubella, hepatitis A, hepatitis B, and varicella) among recruits with pre-existing immunity due to prevailing national recommendations and state vaccination requirements. A major challenge was to incorporate serologic testing into the existing process and stratify the recruits based on immunity status and age for targeted immunizations without increasing costs and affecting the training schedule. To promote culture change, I accomplished the following:

- I established a centralized program management office and secure online Community-of-Practice to consolidate information and share best practices and results, which created a peer-to-peer support group among the geographically separated locations and promoted networking.
- I developed data management solutions to bridge gaps in interoperability and created programs to automatically link serologic results to recruit rosters for stratifying by age and immunity status. This reduced processing time by four hours/day and eliminated 100% of errors due to transcription.
- I created a program to generate individualized labels from the linked serologic database for each recruit to wear through the vaccination line that displayed the targeted immunizations they required. This streamlined the immunization and documentation process and ensured recruits only received the immunizations they needed.
- I facilitated the process of documenting immunizations as soon as they were administered by adjusting process flow, personnel, and computer location. This decreased personnel overtime by 25% and increased timeliness and accuracy of documentation of immunizations to nearly 100%.
- I personally performed initial and annual site visits to determine problems, verify process controls, recognize best practices, and brief senior site leadership on the cost-savings realized from avoiding unnecessary immunizations.
- I inspired an expansion of the program by providing other military service leaders and decision makers at multiple levels with epidemiologic evidence of serologic immunity and validated cost-savings. I presented and shared program results at six national and international public health conferences.
- I oversaw organizational change with long-lasting improvements for conducting serologic testing of over 240,000 recruits per year across 10 military basic training sites by ensuring program requirements were solidified in joint immunization regulations and policies.
- Under my leadership, the program enhanced patient care, improved immunization delivery, and realized a cost-savings based on averted vaccines of over \$5 million/year.
- Within 2 years, all sites were fully implementing serologic screening and targeted immunizations leading to the establishment of a new and effective standard of practice.



## LEADING PEOPLE

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As the first Division Chief for Vaccine Evaluation and Safety, I led the development of a new division within the Military Vaccine Agency to conduct Food and Drug Administration (FDA) required post-licensure clinical studies and vaccine safety and effectiveness evaluations. The division was created to support a critical demand for population studies among military personnel who were receiving recently licensed vaccines, which required post-licensure vaccine safety and effectiveness studies to maintain licensure. Upon my assignment, I quickly realized that the newly created division lacked structure and organization and the reassigned civil service employees lacked adequate training and experience. A major goal was to ensure that assigned personnel had the knowledge and expertise to conduct quality clinical studies and handle study data appropriately while maintaining confidentiality and privacy of study subjects. To unite the team and accomplish study objectives, I performed the following:

- I supervised and developed two civil service employees who were reassigned to the division as study coordinators by ensuring they received adequate training and direction. This increased employee certification by 100% for both individuals within one year of assignment.
- As the principal investigator of the clinical studies, I oversaw and supervised seven on-site contract clinical research associates and program managers hired by three different vaccine manufacturers to support their specific studies. I quickly recognized these highly-skilled and credentialed individuals as valuable assets to the division and maximized the use of their knowledge and expertise to develop others.
- I matched highly experienced and knowledgeable contract personnel with the less experienced civil service employees to develop specific study procedures and training plans. This increased overall cooperation and creative problem solving among team members while reducing tension due to differing backgrounds and certifications and building team commitment to excellence.
- I provided strategic direction and established roles, responsibilities, and operating procedures to ensure staff understood and were able to accomplish study activities while implementing physical, administrative, and technological safeguards to protect and handle study data in accordance with Good Clinical Practices.
- I developed performance and evaluation measurements with clear objectives and met with study personnel on a weekly basis to ensure study aims were completed and procedures were validated. During a routine audit by the Army Human Research Protections Office, the division received zero findings and team members received accolades on their knowledge and "best seen to date" study procedures.
- I developed a strategic plan to distribute work between the civil service employees as studies were completed and closed and new studies were launched. This developed continuity and resiliency for the program while ensuring employees were developing to their fullest potential by taking on new roles and responsibilities. Division employees were recognized with the Commander's Award for Civilian Service, Adenovirus Vaccine Program, U.S. Army (2012).
- I co-authored and published seven manuscripts in peer-reviewed journals, which contributed to general knowledge about vaccine safety and effectiveness.

- I received the Superior Civilian Service Award, U.S. Army (2014) for leading a successful team in the conduct of quality vaccine safety studies and was recognized for establishing best practices.

## RESULTS DRIVEN

While assigned to the Air Force Reserve Command (AFRC) Headquarters as the Occupational Health Team Chief of the AFRC Environmental, Safety, and Occupational Health Compliance, Assessment, and Management Program, I was requested by name by a medical squadron commander of a large aircraft unit (> 1,200 assigned personnel) to revitalize a lagging and out-of-compliance occupational and environmental health program. The unit's occupational and environmental health program had been neglected for at least two years due to staffing issues and had been identified during an inspection as severely deficient and non-compliant in identifying and controlling workplace hazards. To turn this program around, I performed the following:

- I led an overall program assessment and prioritized non-compliant program elements based on the probability and severity of exposures to workplace hazards.
- I organized and trained individuals to conduct health risk assessments and identify and assess occupational and environmental health hazards. 100% of workplaces assessed.
- I re-established and led the Occupational and Environmental Health Working Group to review workplace exposures, determine control measures, develop medical surveillance examinations, and conduct routine and periodic trend analyses. This improved health surveillance for over 600 individuals by linking 100% of medical exam requirements to actual or potential health risks in industrial workplaces.
- I identified efficiencies for streamlining processes and cost-savings while prioritizing limited resources by recommending the removal of medical examinations that were unnecessary for monitoring for current occupational exposures. Laboratory expenses were reduced by 30%.
- I created strategic communications materials to brief commanders, supervisors, and workers about supporting the necessary changes required for protecting the workforce. By achieving buy-in from commanders and supervisors, the occupational health examination completion rate approached 100% for annual and periodic examinations among the worker population within 3 months.
- I developed operating instructions and assigned accountability to ensure compliance with Department of Defense (DoD) and Air Force policies and Occupational Safety and Health Administration standards and promote long-term program management.
- Although I only worked on this effort for 2-4 days per month for approximately 9 months, I was awarded a Meritorious Service Medal, which is usually presented after 3 years of service for revitalizing a critical program and achieving measurable results.
- The program received an "outstanding" during the next inspection with zero findings.

## BUSINESS ACUMEN

As the First Responder Vaccine Initiative Manager, I am responsible for developing the concept plan and centralized management functions to support the first national anthrax vaccine immunization pilot among federal, state, and local first responders. With a very limited budget and no additional staff, I quickly assessed the opportunities and challenges for launching a new venture. To initiate a successful vaccine pilot, I have created robust and comprehensive platforms using existing internal and external resources by accomplishing the following:

- I implemented proven methodologies such as Lean Six Sigma to develop an efficient and effective process for requesting and tracking anthrax vaccine from the Centers for Disease Control and Prevention (CDC) Strategic National Stockpile to participating state and local providers. This improved internal processing time by 20% by automating data entry and establishing a relational database.
- I used Capability Analysis strategies to establish criteria for evaluating the level of maturity required for capacities that support technological and personnel infrastructure capabilities at the state and local level. This will increase the ability to identify jurisdictions with high-functioning systems necessary for pilot success and ensure the minimum program elements exist to link existing infrastructure to support the pilot.
- I cultivated partnerships with Department of Homeland Security components such as the U.S. Customs and Border Protection, Science and Technology, and U.S. Coast Guard that have well-established training capabilities and access to development software for building a comprehensive web-based and interactive training program on anthrax preparedness and protection. These efforts maximized the use of existing internal resources and eliminated the need to outsource the development of training modules.
- I assimilated materials and best practices from proven credible vaccine information sources (Department of Defense and CDC) to establish a robust strategic communications plan and frequently asked questions databank for responding to questions and inquiries from a wide range of stakeholders, including the White House, Congress, state and local officials, first responders and their families, healthcare providers, and the public, before the pilot is launched. These actions will increase and maintain consistency in messaging and timeliness for responding to questions regarding a voluntary anthrax vaccine immunization program among first responders.
- I collaborated with DHS public affairs and communication experts to develop a long-term comprehensive branding strategy in order to achieve specific goals and plan for future expansion of the pilot. By branding the pilot as the "First Responder Vaccine Initiative," the focus is now on enhancing protection through vaccination for first responders instead of on specific vaccines.
- I provided technical comments and subject matter expertise on two House Bills and one Senate Bill that promote public health preparedness and first responder protection before, during, and after an anthrax event. I received an Office of Health Affairs Appreciation Award for my support in promoting public health preparedness and increasing resiliency and protection among first responders.



## BUILDING COALITIONS

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While assigned to the position of Afghan National Security Forces (ANSF) Embedded Preventive Medicine Team Senior Lead/Mentor in support of Operation Enduring Freedom, I discovered the inappropriate management and administration of vaccines at three ANSF Recruit Training Centers (RTCs) and that only a few of the Afghan medical doctors and personnel had ever had any training on how to manage and properly administer vaccines. Therefore, my goal was to create a sustainable vaccine management and administration training program for my Afghan counterparts in their own language while overseeing a successful transition of assets.

- I created trust and a working relationship with the chief physicians of the Afghan National Police (ANP) RTCs by helping them secure operational refrigerators for properly storing vaccines in the RTC clinics.
- I achieved acceptance by attempting to speak, read, and write in Dari, which built trust.
- I led the development of a vaccine management train-the-trainer program by creating lesson plans in Dari with the help from an interpreter and with input from the chief physicians. This created enthusiasm for supporting vaccination clinics and vaccinating the ANP recruits instead of hoarding vaccines and risking vaccine loss due to long-term storage. I established the motto "the best place to store vaccines in the recruits' arms."
- I oversaw the adoption of the train-the-trainer program by training and empowering a small cadre of Afghan medics including the chief physicians who then trained the larger group of medics. The success was two-fold: (1) the Afghans now had a training program in their own language that they could implement, and (2) I could monitor knowledge gaps in training by watching the hands-on exercises.
- I led creative solutions to complex problems. The Afghans were receiving vaccines from multiple countries and often the packages and instructions were in different languages. I worked with my ANP counterparts to develop a process for identifying different vaccines using notecards and baskets to sort vaccines by type based on matching packages and labeling. I created a training module to address expiration dates and temperature monitoring devices. This increased quality of care and ensured individuals received properly maintained and correct vaccines.
- I led difficult meetings with the Afghan medical leaders and chief physician who opposed a plan to vaccinate the ANP women but over time the chief physician agreed to support the plan. I ensured the program was acknowledged as their idea among their command leadership and prepared and trained them to successfully conduct a vaccination clinic without coalition support. The vaccination clinic was very successful and demonstrated their unity in effort and ability to overcome barriers.
- Before I left Afghanistan, I provided multiple copies of the vaccine management and administration training program on CDs to the Afghan medics. I was awarded the Bronze Star for my efforts in Afghanistan and for promoting public health, nation building, and mentoring the Afghan National Security Forces and medics.

## **OTHER PROFESSIONAL POSITIONS HELD**

Professorial Lecturer/Adjunct Professor (Part-time), The George Washington University, Milken School of Public Health and Health Services, November 2013–Present

Health Scientist, Northrop Grumman Contract Support for the Office of the Assistant Secretary of Defense for Health Affairs, January 2005 – July 2006

Policy Analyst, Analytical Services, Inc., Contract Support for the Air Force Medical Support Agency, April 2003 – December 2004

Epidemiologist/Surveillance Coordinator, Centers for Disease Control and Prevention, June 2001 – April 2003.

Operations Division Chief, Eagle Group, Inc., Contract Support for the Department of Defense Anthrax Vaccine Immunization Program, January 1999 – June 2001

## **PROFESSIONAL AFFILIATIONS/HONORS/AWARDS:**

- Certificate of Appreciation, Office of Health Affairs, DHS, 2016
- Superior Civilian Service Award, U.S. Army, 2014
- Meritorious Service Medal, Headquarters, U.S. Air Force Reserve Command, 2006 and 2013
- Bronze Star, Operation Enduring Freedom, Afghanistan, 2012
- Commander's Award for Civilian Service, Adenovirus Vaccine Program, U.S. Army, 2012

## **EDUCATION AND SPECIALIZED TRAINING**

- Bachelor of Arts, Biology
- Master of Public Health, Environmental and Occupational Health
- Doctor of Public Health, Environmental and Occupational Health
  
- Certified Safety Professional
- Air War College
- Lean Six Sigma Green Belt
- Leading Teams with Emotional Intelligence
- Leadership Essentials